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*In*  
Inaugural Essay.

*On*  
Gastritis.

*By*

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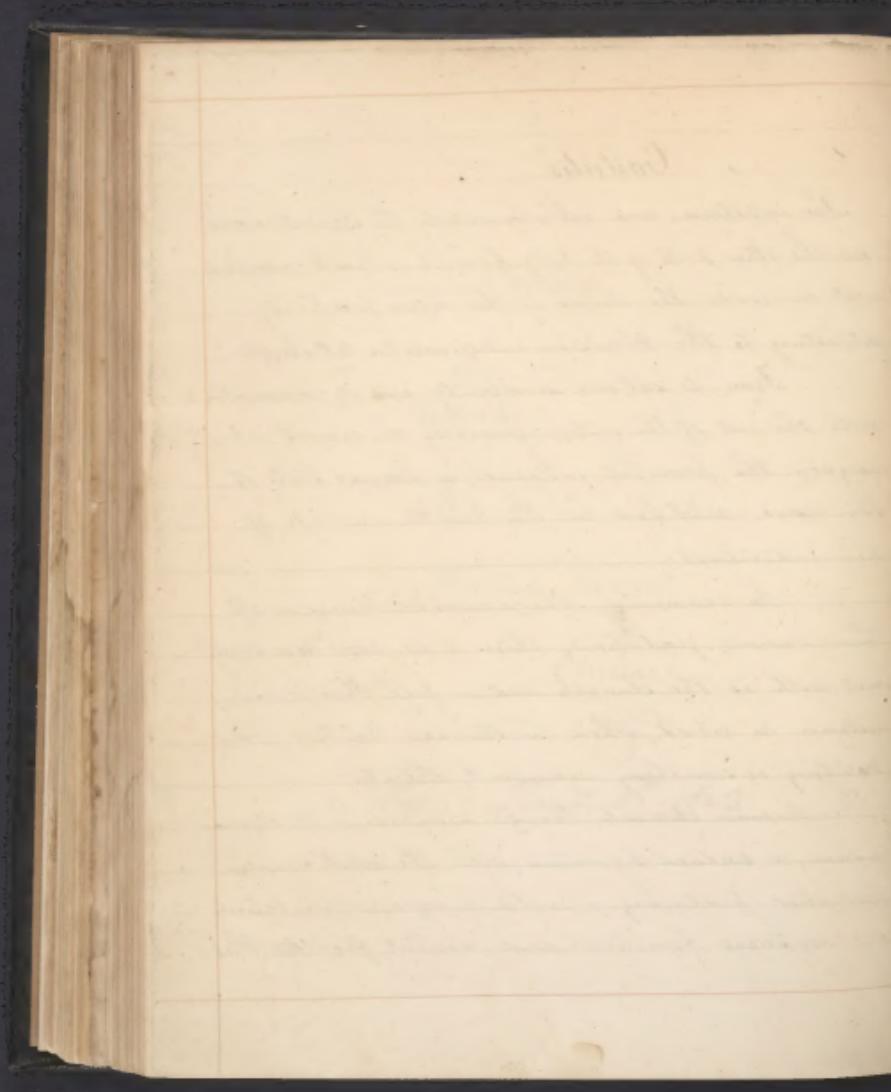
## Gastritis

The importance and influence which the stomach exerts over the other parts of the body, from its intimate connection, must ever render the disease of this organ particularly interesting to the Physician and speculative Pathologist.

From its extreme sensibility and its communication with the rest of the system generally, we cannot but recognize the powerful influence, a diseased state of this viscus must have over the health, and life, of an individual.

In examining the animated beings in all their various gradations, there is no viscus so constantly met with as the stomach and in fact there is no instance on record, where the stomach has been found wanting or something equivalent thereto.

The human stomach though simple in its organization, is endowed by nature, with the most complex properties, producing a centre of sympathies between our corporeal functions and mental faculties that

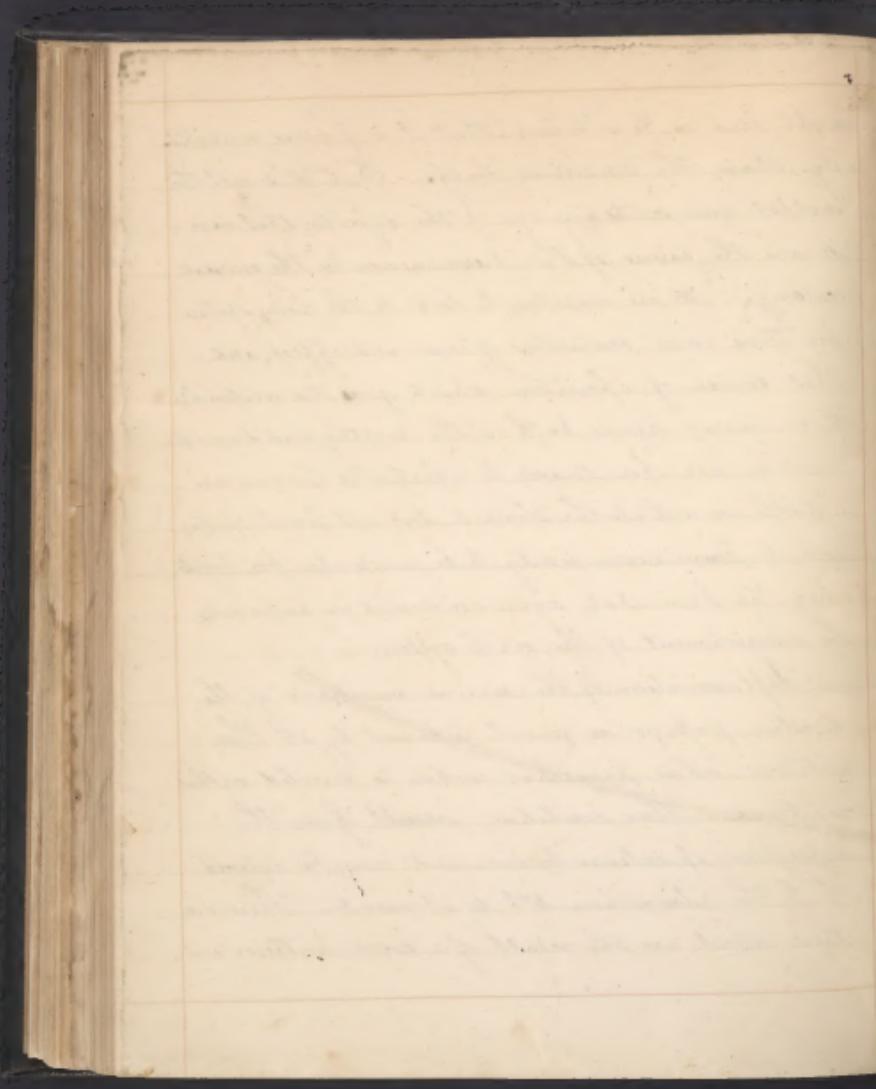


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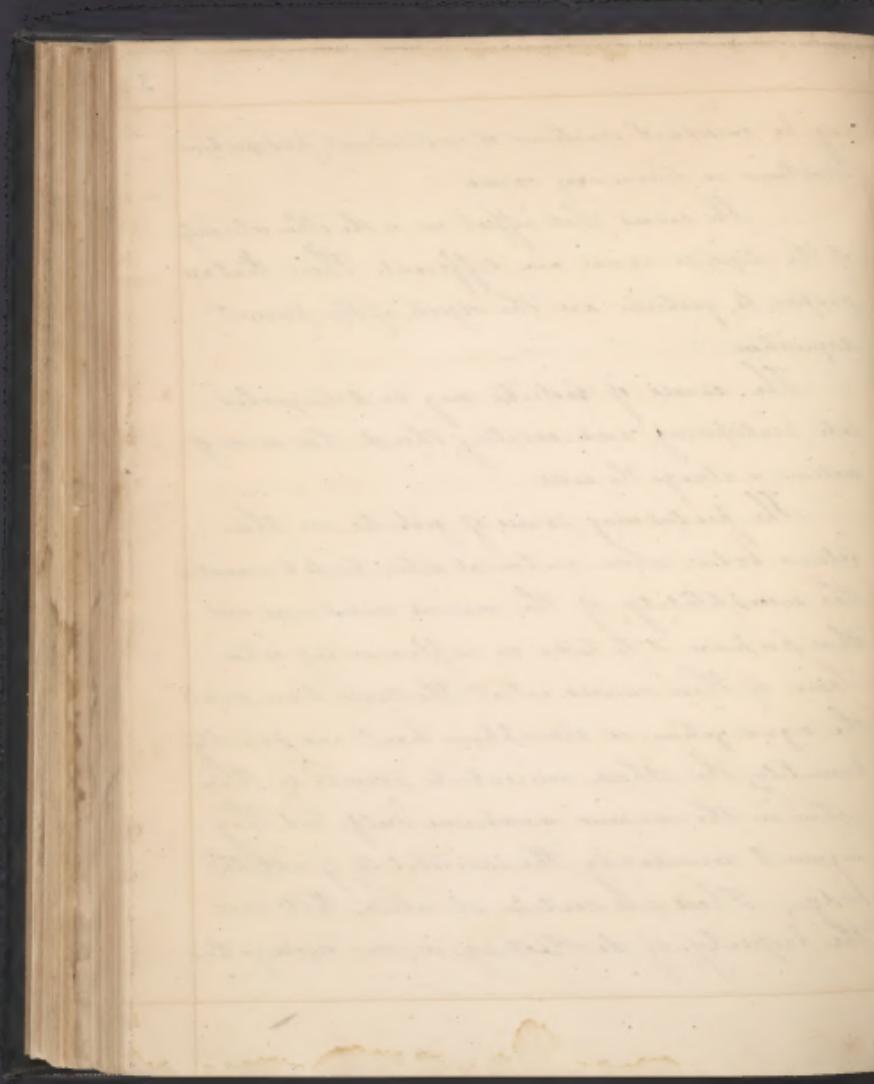
might lead us to a belief, that it is of more sensibility than the sensorium itself. But it is not the scalpel and scrutinizing eye of the disector, that can discover the cause of this preminence in the animal economy. We are compelled to look to the living system for those nice connections of cause and effect, and that source of association which gives it a relationship to so many organs both in the healthy and diseased.

There are few diseases to which the human race is liable in which the stomach does not participate, and its preminence is only to be accounted for, by its being the principal organ concerned in preparing the nourishment of the whole system.

Inflammation of the mucous membrane of the digestive passages in general is caused by all those irritants whose principal action is directed on that membrane. These irritants result from the impulsion of exterior bodies and may be referred 1st to the atmosphere 2nd to aliment. There are others which are the result of a disease anterior and







may be considered sometimes as constitutional predispositions sometimes as determining causes.

The causes that affect one or the other extremity of the digestive canal are different. Those that are proper to gastritis are the objects of the present disquisition.

The causes of gastritis may be distinguished into predisposing and exciting, though their mode of action is always the same.

The predisposing causes of gastritis are those interior bodies, whose continual action tends to accumulate the susceptibility of the mucous membrane and thus prepare it to take on inflammatory action. Some of these causes act at the same time on all the organization, as atmospheric heat and probably humidity; the others concentrate primarily their action on the mucous membrane itself, but they augment secondarily the excitability of all the body. There are certain elements that have the property of developing in our organization



action than is necessary to maintain the general  
harmony.

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The exciting causes of gastritis may be those that have been mentioned as predisposing causes which by the combination of their action may give rise to inflammation of the stomach; but most frequently it is produced by some excesses in aliment or  
drink or a fit of anger.

Concussive poisons contusions falls blows on the epigastrium may occasion gastritis without any predisposition but will develop the disease with more energy when the patient is already in a state of predisposition. Vomits and purgatives also when the predisposition exists in a high degree injudiciously administered rarely fail to give rise to the disease.

There are some causes of gastritis under the stomach more susceptible of becoming inflamed under the influence of different irritants such are in general chronic inflammation of other organs.



Gastric ulcer is as common to the ulcerative as it is to chronic & to typhoid fever. There are some peculiar to the ulcerative, & others that are not. The most common is gastritis.

"Acute gastritis" sometimes commences with the most terrible symptoms of cholera. The patient in fact mostly does not differ from cholera. The patient obstinately vomits whatever he swallow, followed by discharge in both directions of thick mucous and bloody matter. Fever is a symptom. At other times gastritis is announced without vomiting but is always accompanied with a violent fever that is not necessarily preceded by a chill. The patient complains that internally he is tormented by a sharp acid burning heat and most commonly the pharynx is painful. The tongue is red and clean or covered with a mucous film and becomes dry when the patient is long without饮水; Thirst considerable and a desire for cold and generally accutated with



which are often retained, while all others are rejected by the stomach. Constipation exists if the mucous membrane of the intestines is sound or is but slightly affected but if the colon be highly irritated, diarrhoea and tenesmus are attending symptoms. Pain is mostly felt in the epigastrium and hypochondria especially in the right side. These pains appear to be deeply seated and are frequently ~~not~~ exasperated by pressure especially those in the hypochondria except when depressed with some force. They are often lancinating and accompanied with a sense of obstruction. They diminish manifestly after the patient has evacuated const and especially acid ~~urine~~.

At the end of some days the vomiting ceases though the other symptoms remain; sometimes it subsides in a relapse in the course of the disease, and the patient's complaint is a continuous nausea caused as it were by a round body, that has a tendency to



mount to the pharynx, and which pain fully constricts the base of the chest. Each vomiting is followed by a temporary relief and the patient often anxiously demands the administration of an emetic.

Absolute impossibility of swallowing, attributed by the patient to an obstacle situated at the bottom of the pharynx or top of the sternum, is to be regarded as dysphagia. The disease in the greatest degree of intensity. It shuns the stomach vicinity, contracted, and in so irritate a condition that it is, uses to dissolve itself.

Such are the signs of gastritis that are to be drawn from an attentive examination of the functions of digestion. Many of them may be wanting. The pain-which one is the pain-sometimes does not exist in gastritis the most intense. So the true diagnostic of disease can only result from the collection of all the attending train of symptoms; the sympathetic disturbances of other functions are to be particularly regarded.



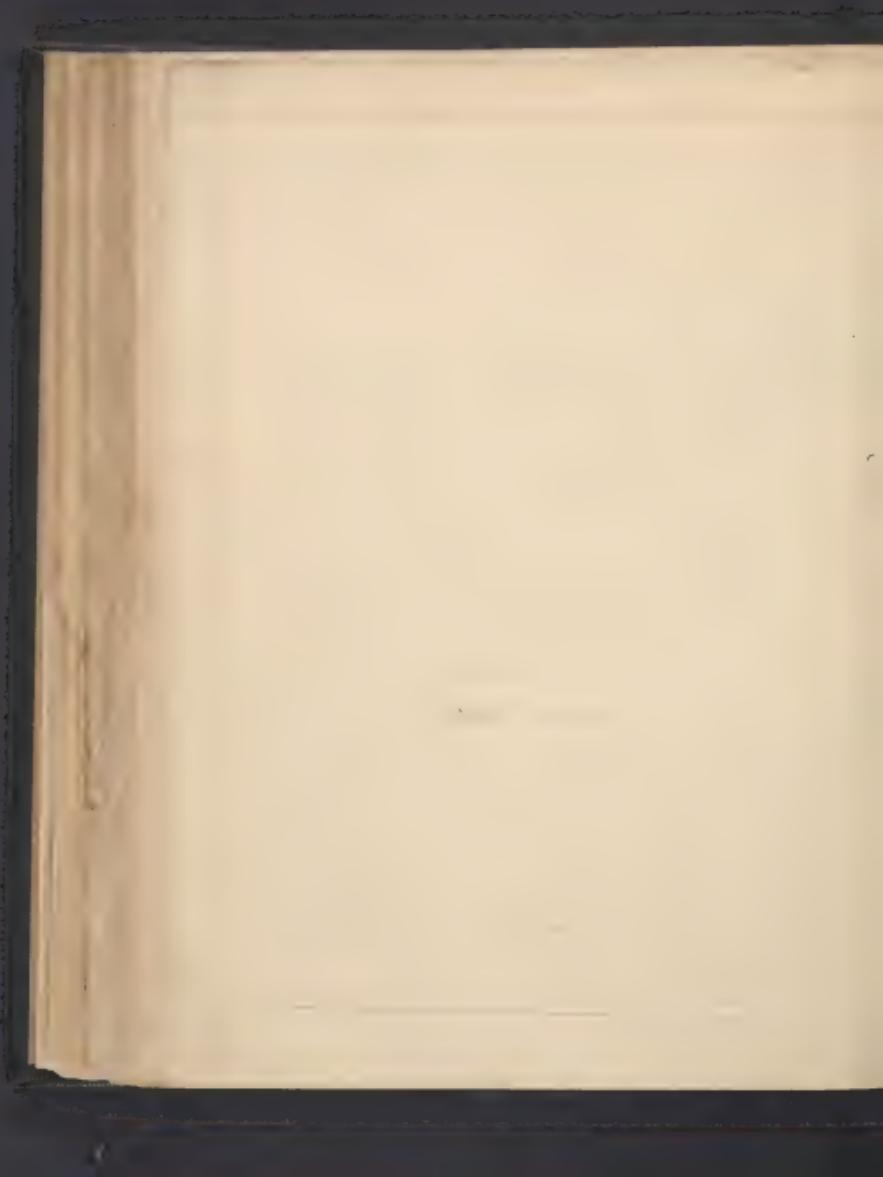
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The sympathetic disturbances that accompany such gastritis are 1<sup>st</sup> as respects the head, the sensations of the nerves, and the movements of the muscles subject to the will.

Headache may exist but is not an essential symptom. Alterations of the mind, at first slight, and corresponding to the periods of the most lively suffering, afterwards becoming constant but  $\sim$  occasionally only slight distractions, pain especially belonging to the character of this inflammation.

Patients are seen delirious with as violent delirium as is met with in Typhus fever or in Plaemelie. But in these cases there is considerable analogy to those diseases as at the same time, the conjunctiva is injected, the eye inflamed and the whole Physiognomy is altered.

Sometimes the delirium is of a giddy character; it is when gastritis is unaccompanied by local pain, but more frequently the victim



of the pain renders the patient distract ed, moros and impatient. In proportion as the disease advances and the sufferings increase, the mind is more and more affected until lost in complete coma.

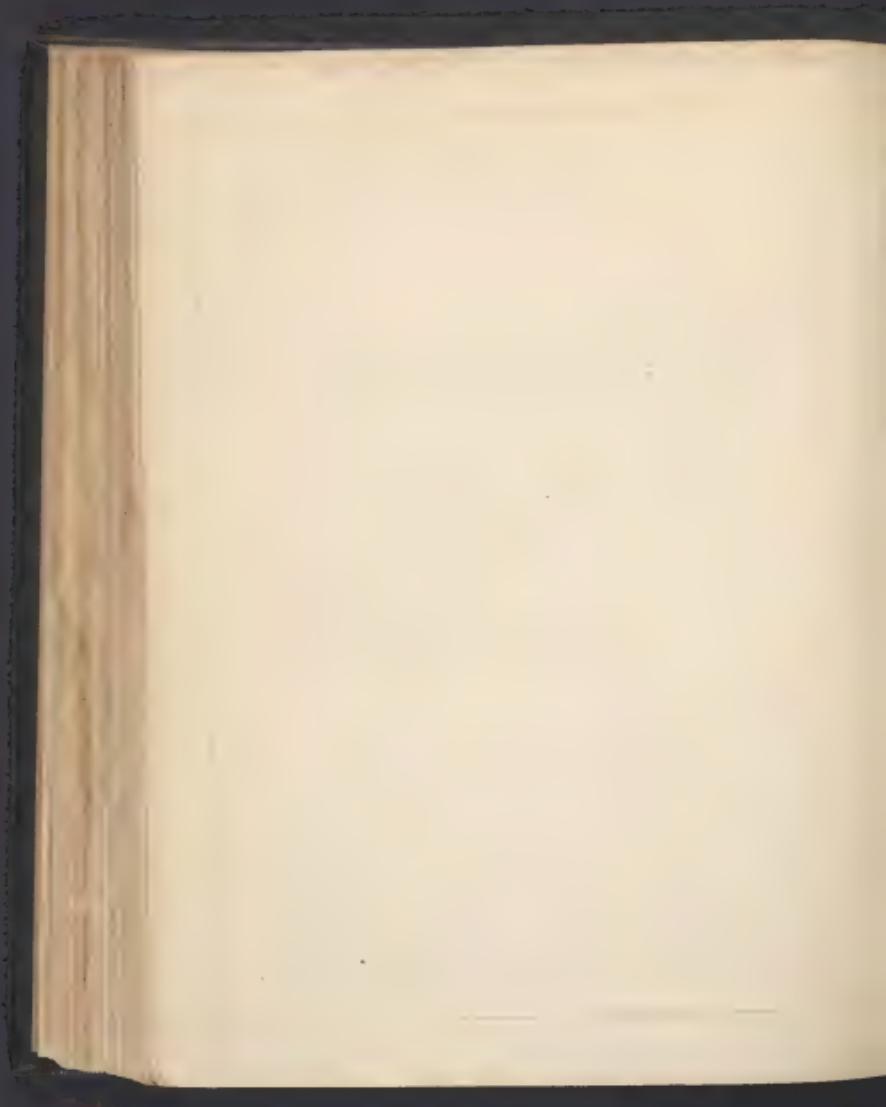
At the same time are observed irregular contractions of the muscles vicinity, both about the sternum and without consecutive motion. The patient unavert himself while he continues still alledging that the heat that devours him is more insupportable when the chest is covered. If there are topical applications maintained by bandages round the body he often tears them off. He rises lay down and again places himself into every attitude. He never looks right and his countenance gives the expression of the most acute sufferings. When interrogated respecting the nature and seat of his pain he will carry his hand towards the lower part of the sternum but can not accurately describe his sufferings. The sensation of interior burning is that with which



he has a distinct inclination. His wife however has  
these different symptoms and the insatiable desire  
which that succeeds the emetic more uniformly  
thinks that we can have an assurance that all  
this anxiety is the consequence of an insinuation  
of the internal surface of the stomach. Medicines  
Strength is not destroyed since in the midday  
sinking that follows the next storm occurs and  
suddenly destroyed the most dangerous effects.

This character gives to the several parts of the  
skin sufficient liberty that the skin  
from typhus fever to street ulcerous masses.

2<sup>nd</sup> With respect to the anterior ventilation there is often times observed a cough severe,  
dry, hollow, accompanied with an acute lancinating  
pain; an expectoration of clear mucus &c. the  
mixed with streaks of blood a white and opaque  
as that called white the greatest salivation and  
pneumoniasies at the period of their taking  
a general pain of the Throat now with a cold



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Sorely to it for a little upon a person, in a cold  
heat, & a little upon the part again covered, not to  
the same point as the stomach, and so large and  
noxious suggests the irritation is buried and remains  
so. It seems a pain of the lung is most noxious  
and arises from the pain or uneasiness of the stomach  
that sympathetically paralyzes the involuntarily  
muscles of the lung.

Next are the sympathetic laws that  
the inflammation of the stomach cannot into  
the function of irritation. This symptom  
has no other consequence than as connected  
with those a tick immediately arises from  
the disease again.

3<sup>rd</sup> Refreshing the circulation and  
secretions we find in the commencement of  
gastroitis. It must be rare and, & is, and  
often as large as it would be in scrofula, in  
accordance with the secret of symptoms, i.e. rest mainly  
in warmth because these sympathies are a



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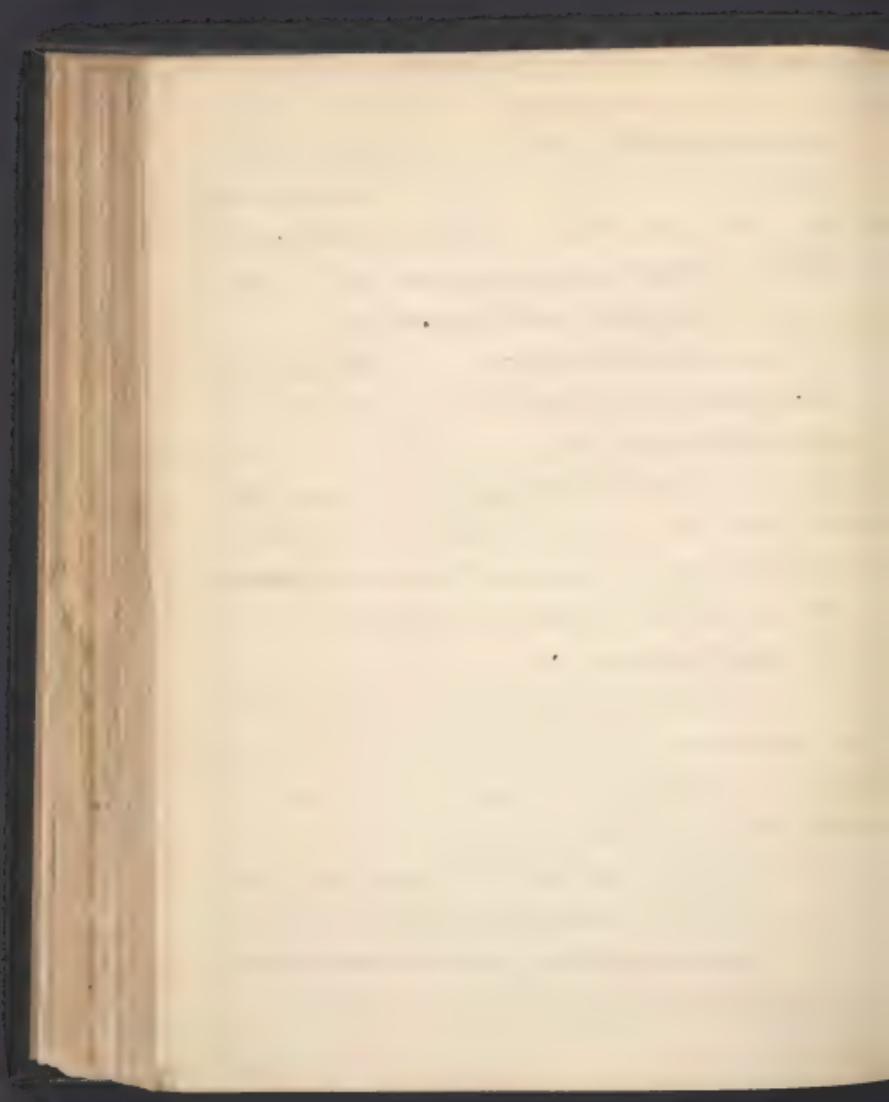
proof that there is a sanguine affection in the constitution of the patient more precisely.

It is precisely this tenderness that may cause a change in the character of the disease.

In the inferior grades of the disease when the powers of the system have become exhausted by pain, the pulse no longer presents the same violence; it is contracted, insulsive, intermittent, irregular. In grades still decidedly marked and towards the close of life it is entirely lost.

The heat of the skin is insidiously increased in the violence of the acute state; it is always dry and hot; when the disease is in its decline the skin is cold and as it turns towards a chronic form the skin is cold nothing can impart warmth to it it always congeals to the pulse.

All the sanguineous secretions are suppressed and the sweat is interdicted at the end of some days when the affection has been very rapid.



In laying down the treatment of any disease general principles can alone be communicated, in an essay like this, and in every case certain innovations must necessarily occur which require judgement, experience and observation.

The indications of cure are extremely obvious having to contend with an active inflammation of a very injurious quality, one that may be said with great strictness to preside over the different functions of the animal economy, for when this becomes disordered the whole system appears to participate in its deranged action.

It will therefore be necessary, in the proper management of the disease to allow it to run by degrees and repeated bleedings, not so as to be introduced too abruptly. The purpose of the course may be that we shall not be inclined to take too much blood at once, and that we shall be enabled to take and take up in case the physician, who is with or before him, can be recommended.



refuse which sedation is preferred by Dr Jackson  
of this city, or which practice a sound analgesic  
explanation may be given. In the generality of  
authors we find those recommending single  
and repeated bleedings but such practice is to  
be considered as injurious; as it is to be rec-  
lected that the nurse, is no guide for us for  
by extracting blood especially we unbind the bands  
of the system and the parts become softer and  
fuller, the remedy is to subtract from our system  
what is the state of tension.

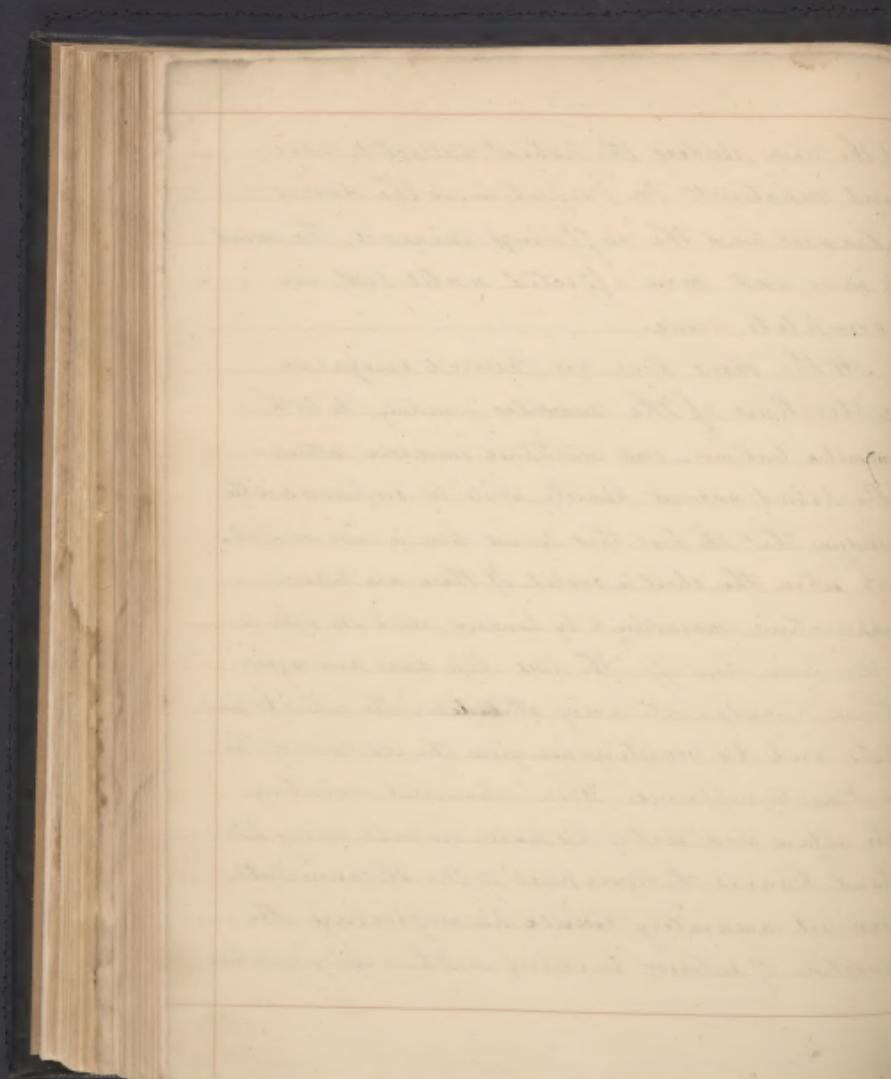
This is one of the features of the disease, to  
get rid of the whole system and particularly  
the vessels. It is to be demonstrated how best  
to take it out in a state of tension but must  
be set consider in point of convenience in the  
treating of patients and certainly there can be  
no difficulty in deciding when they are and how to  
best get rid of the tension out of the system.  
They should be cut in immediately and not



organ, and should be sufficiently large to cover the whole of the epigastric region, as the pain is not proportionally increased by it and the advantages are much greater: as a potent remedy warm fermentations to the whole of the abdomen if they can be borne, should be had recourse to.

The irritability of the stomach is so great generally as utterly to preclude the possibility of any medicines being administered by the mouth, and for the purpose of quieting the stomach we must resort to the usual antiemetic medicines. This being done our next attempts should be to open the bowels and to do this we may have recourse either to Opium Salts or to a combination which is highly extolled by Dr Chapman viz Belonel & Opium in small doses who says that it also has a tendency to reduce inflammation.

The intolerable thirst of which the patients complain is to be allayed by means of slightly



acidulated drinks; and what has been found  
much superior by Dr Chatman is with insinuate  
quantities and frequently repeated.

In the sinking stage where we suspect  
a disposition in the disease to run into gangrene  
we must administer opium and spt's of  
Tartar-tine freely which have sometimes  
been known to arrest it in the incipient  
stage but generally all our endeavours  
are unavailing and death closes the scene.

P. Sicklen  
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